

In re Application of:

SHINICHI MATSUMOTO

Application No.: 10/075,399

Filed: February 15, 2002

For: PERSONAL DIGITAL ASSISTANT DEVICE,
SERVICE INFORMATION DISTRIBUTION
DEVICE, CONTROL METHOD,
COMPUTER-READABLE STORING MEDIUM
AND COMPUTER PROGRAM



Docket No. 03500.016189

Examiner: S. Alam

Group Art Unit: 2162

Date: May 11, 2006

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment And Statement Of Substance Of Interview and a Request For Continued Examination (RCE) Transmittal in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 9	MINUS	** 28	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 4	MINUS	*** 8	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$_____ is enclosed.
- Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ 120.00 to cover the fee for a one month extension is enclosed.
- A check in the amount of \$ 790.00 to cover the Request for Continued Examination (RCE) fee is enclosed.
- A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Damond E. Vadnais
Attorney for Applicant
Registration No.: 52,310

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120

CA_MAIN 112293v1